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Bib Data Sheet

CONFIRMATION NO. 1051

|                                    |   |                     |                               |  |
|------------------------------------|---|---------------------|-------------------------------|--|
| <b>SERIAL NUMBER</b><br>10/775,484 | <b>FILING OR 371(c)<br/>DATE</b><br>02/10/2004<br><b>RULE</b> | <b>CLASS</b><br>375 | <b>GROUP ART UNIT</b><br>2611 | <b>ATTORNEY DOCKET<br/>NO.</b><br>028CIP-119 |
|------------------------------------|---|---------------------|-------------------------------|--|

## APPLICANTS

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 Steve Moore, Escondido, CA;

\*\* CONTINUING DATA \*\*\*\*\* *Dr.*

This application is a CIP of 10/177,313 06/21/2002 ABN

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *Dr.*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

05/06/2004

\*\* SMALL ENTITY \*\*

|   |                                   |                                |                               |                                    |
|---|-----------------------------------|--------------------------------|-------------------------------|------------------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no   | <b>STATE OR<br/>COUNTRY</b><br>CA | <b>SHEETS<br/>DRAWING</b><br>5 | <b>TOTAL<br/>CLAIMS</b><br>21 | <b>INDEPENDENT<br/>CLAIMS</b><br>4 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                                   |                                |                               |                                    |
| Verified and Acknowledged<br>Examiner's Signature <i>[Signature]</i> Initials   |                                   |                                |                               |                                    |

## ADDRESS

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 Attention: Steve Moore  
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 Carlsbad, CA92008

## TITLE

Ultra-wideband communication through a power grid

|                                       |   |  |
|---------------------------------------|---|--|
| <b>FILING FEE<br/>RECEIVED</b><br>437 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees                              |
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